_	sone .		U.S. Pa	Approve	d for use through 7/31/2006, OME	B/22 (12-04) 3 0651-0031 OMMERCE	
PETITION FOR EXTENSION OF TIME UNDER 37 CFR FY 2005  (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.)				tion of information unless if displays a valid OMB control number.  Docket Number (Optional)  02-763-B			
Application Number 10/667,271				Filed September 16, 2003			
		terference Mediated Inhibition of Herid (siNA)	oatitis C Virus (HCV) (	Gene Expressi	on Using Short Interfer	ing	
Art Unit 1635				Examiner BOWMAN, Amy H.			
	is a red	quest under the provisions of 37 CFR 1.1	36(a) to extend the period	od for filing a rep	ply in the above identified		
The	reques	ted extension and fee are as follows (che	eck time period desired a	and enter the ap	propriate fee below):		
	<u>Fee</u> <u>Sm</u>				nall Entity Fee		
	$\boxtimes$	One month (37 CFR 1.17(a)(1))	\$120	\$60	\$12	20.00	
		Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$		
		Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$		
		Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$		
		Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$		
	Applicant claims small entity status. See 37 CFR 1.27.						
	A check in the amount of the fee is enclosed.						
	Payment by credit card. Form PTO-2038 is attached.						
	The Director has already been authorized to charge fees in this application to a Deposit Account.						
$\boxtimes$	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 13-2490. I have enclosed a duplicate copy of this sheet.						
	WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
l am	the	applicant/inventor.					
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).							
	attorney or agent of record. Registration Number 47,132						
Ar	nita J. T	attorney or agent under 37 ( Redistration number if acting ur signature ersptra, Ph.D.		<u>JU</u>	NO 13 7006 Date Date BORGOO 1324	98 1866727	
		Typed or printed name			Telephone Municer DA		
		es of all the inventors or assignees of record of the $\epsilon$ irred, see below.	entire interest or their represent	ative(s) are required.	. Submit multiple forms if more th	an one	
	Total	of forms are submitted.					

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.